

		Complete if Known	
		Application Number	10/603,094
		Filing Date	June 25, 2003
		First Named Inventor	Don J. DIAMOND
		Examiner Name	Humphrey, Louise Wang Zhiying
		Group Art Unit	1648
<input checked="" type="checkbox"/> Applicant claims small entity status	Attorney Docket Number	1954-410	
Total Amount of Payment	(\$) <u>510.00</u>	Confirmation Number	7356

METHOD OF PAYMENT (check one)

- The Commissioner is hereby authorized to charge the fees indicated below or credit overpayment to Deposit Account Number 02-2135 in the name of Rothwell, Figg, Ernst & Manbeck
- Charge **any additional fee** required under 37 CFR 1.16 and 1.17 to Deposit Account No. 02-2135.
- Payment by check enclosed

FEE CALCULATION

1. FILING, SEARCH AND EXAMINATION FEES

Code	Fee	Fee Description	Fee Paid
1001	150	Utility Filing Fee <i>395 filed before Dec. 8, 2004</i>	[]
1111	250	Utility Search Fee	[]
1311	100	Utility Examination Fee	[]
1002	100	Design Filing Fee <i>175 filed before Dec. 8, 2004</i>	[]
1112	50	Design Search Fee	[]
1312	65	Design Examination Fee	[]
1003	100	Plant Filing Fee <i>275 filed before Dec. 8, 2004</i>	[]
1113	150	Plant Search Fee	[]
1313	80	Plant Examination Fee	[]
1004	150	Reissue Filing Fee <i>395 filed before Dec. 8, 2004</i>	[]
1114	250	Reissue Search Filing Fee	[]
1314	300	Reissue Examination Fee	[]
1005	100	Provisional Filing Fee	[]

SUBTOTAL \$

2. CLAIMS

	Extra Claims	Fee	Fee Paid
Total Claims	[13] - 20* = [] x	\$25 = []	
Independent Claims	[2] - 3* = [] x	100 = []	
Multiple Dependent Claims	+ []	180 = []	

* or number previously paid, if greater

SUBTOTAL \$

SUBTOTAL \$510.00

3. APPLICATION SIZE FEE

Total Sheets [] - 100 = []/50 = []** x \$125 =
** Number of each additional 50 or fraction thereof

SUBTOTAL \$

03/29/2007 SZEWDIE1 02223166 10603094

01 FC:2223 510.00 DA

SUBMITTED BY			Complete (if applicable)	
NAME AND REG. NUMBER	Martha Cassidy, Reg. No. 44,066			
SIGNATURE		DATE	March 19, 2007	DEPOSIT ACCOUNT USER ID